PAEDIATRIC SURGE SEASON!

Late summer, the sun shines brightly on Cape Town and surrounds. The beaches are busy on the weekends with everyone enjoying the warm weather, the cool water and the chance to escape from the hectic working week.

However, this is also the time when viruses and germs take advantage of the warmer weather and infect many children with diarrhoea and chest infections. In the past the period January to May was labelled the “gastro season”. However, the number of respiratory tract infections is also high during these times, so the season has been relabelled the “surge season”.

Various contingency plans are put in place at all facilities treating children. Each clinic and hospital has an “ORS corner”, where the caregivers are taught how to mix sugar-salt solution, and to give it to the children as soon as possible.

(reminder: To make Sugar-Salt Solution: Add 8 level teaspoons sugar and ½ level teaspoon salt to 1 litre clean water)

At Karl Bremer Hospital, bed capacity in ward 4C can be increased up to a total of 42 beds, and if necessary to 45 in an emergency where all hospitals in the Metropole are filled to capacity (hopefully this will not be necessary!).

3 beds in the Paediatric Emergency Centre can also be used for rapid rehydration in children that are expected to be discharged home from EC. What is extremely important for everyone is the following:

(i) ALWAYS, ALWAYS, ALWAYS wash your hands before touching food, after using the toilets, between examining or treating patients, etc.

(ii) Ensuring that all children are up to date with their immunisations.

(iii) Use every opportunity to ensure that the caregivers know how to make the sugar-salt solution.

(iv) Children with diarrhoeal disease need to be identified and managed early in the Paediatric EC. If having to wait for a doctor, regular reassessment and re-triage needs to be done at least hourly.

The “surge season” is a time when everyone managing sick children will be working a lot harder. The ward is fuller, noisier, and everyone is doing their best to keep up with the fluid and oxygen requirements of each child. This is always a challenge, but we have no doubt that the staff at Karl Bremer Hospital is up to the challenge, and we shall once again “ride the storm” as we have so successfully done in the past.

REMEMBER: WASH YOUR HANDS!!

Written by Dr Mark Wates
DIARRHOEA IN CHILDREN

WHAT IS DIARRHOEA?
Is a condition that involves the frequent passing of loose or watery stools.

WHAT TO DO AT HOME
If your child is younger than a year, don't wait until you see signs of dehydration. Signs of dehydration can include your baby being thirstier than usual and having less urine than usual. If you breast feed your baby, try to offer your breast for 1 to 2 minutes every 10 minutes. If you make use of cup feeding, increase the number of feedings to make up for lost fluids. Do not give your baby plain water. Use an oral rehydration solution, which you can make at home. Here's the recipe, measure a litre of lukewarm water, with 8 level teaspoons sugar and ½ level teaspoon salt and mix well. You can also give them cereal with milk or oral rehydration. If your child is still not getting enough fluids, make use of the oral rehydration. Give your child frequent small meals, at least 6 a day, while he or she is having diarrhoea. The best foods for your child are easily digestible foods such as rice, cereal, pasta, bread, cooked beans, mashed potatoes, cooked carrots and bananas. Pretzels or salty crackers can help your child replace the salt lost from diarrhoea.

WHAT TO DO IF YOUR CHILD IS 11 AND YOUNGER
Make sure your child is drinking often frequent, small amounts. Children ages 4-10 should drink at least 6-10 cups of liquids to replace lost fluids. Also note not to give your child plain water; rather give the self-made oral rehydration as mentioned on top. Do not replace fluids with fruit juice or soda drinks, unless you don't have any other rehydration fluids available. You can also give them cereal with milk or oral rehydration. If your child is still not getting enough fluids, make use of the oral rehydration. Give your child frequent small meals, at least 6 a day, while he or she is having diarrhoea. The best foods for your child are easily digestible foods such as rice, cereal, pasta, bread, cooked beans, mashed potatoes, cooked carrots and bananas. Pretzels or salty crackers can help your child replace the salt lost from diarrhoea.

WHEN TO SEEK MEDICAL SERVICES
When your baby or child seems very sick, too weak to stand up Has had diarrhoea for more than 24 hours When your child is younger than 6 months If your child can't hold down fluids or has vomited more than 2 times Is less than a month old with 3 or more episodes of diarrhoea Passes more than four diarrhoea stools in 8 hours and isn't drinking enough Has stomach pain for more than 2 hours Has not urinated in 6 hours if a baby or 12 hours if a child Confused or dizzy.

GENERAL TIPS
Wash hands thoroughly after changing nappy and before feedings Do not give any medications to stop diarrhoea unless so prescribed by a doctor.

Written by Sr Arends
KBH EXCELLENCE

Congratulations to all the Excellence Award Nominees and Category Winners. The 3rd annual Excellence Award Ceremony was held on 28th November 2014 for Karl Bremer staff members. The keynote address was given by Dr. K Cloete, Chief Director, MDHS. There were 91 nominations of which 35 candidates were adjudicated as category winners. We have interviewed a few of the category winners:

Support Staff:
Mr M. Sass (MS)
Mrs R Smith (RS)
Mr Z Danga (ZD)

Administration:
Ms S. Momath (SM)
Ms D. Parker (DP)
Mrs M van Deventer (MvD)

Nursing:
SN N Nokosi (NN)
RPN M Steenbok (MSt)
ENA H Coetzee (HC)

Allied Health:
Mrs M Naidoo (MN)

Hoe het jy gevoel toe jy genomineer was/How did you feel when you got nominated?

MS: Ek was baie beindruk aangesien ek nog nie so lank by KBH werksaam is nie
RS: Ek het baie goed gevoel oor die nominasie
ZD: I felt overwhelmed. I’ve worked so hard to improve myself and this nomination compliments all the hard work.
SM: I felt overwhelmed, recognised and appreciated
MvD: Trots-op die gehalte werk wat ek verrig
NN: Happy and unexpected
MSt: Ekt baie geeerd gevoel
HC: Ekt opgewonde asook baie trots gevoel
MN: I was totally surprised, because usually the allied health workers are never nominated for or included in anything. As we are very small departments, all events usually pass us by.

Hoe lank werk jy al by KBH? / How long have you been working at KBH?

MS: 2 jaar
RS: 15 jaar
ZD: 2 years and 4 months
SM: 4 years
DP: 8 years
MvD: 16 jaar
NN: 5 years
MSt: 9 jaar
HC: 7 jaar
MN: 9 years
**AWARD WINNERS**

**Waar sien jy jouself oor 5 jaar? / Where do you see yourself in 5 years’ time?**
- **MS:** Ek sal graag dan n Linne Toesighouer wil wees.
- **RS:** Afgetree. Ek wil rustig verkeer met my familie
- **ZD:** Studying to qualify myself as a Registered Professional Nurse (RPN)
- **SM:** Senior Management Level
- **DP:** Retired
- **MvD:** Afgetree
- **NN:** Studying to qualify myself as a Registered Professional Nurse (RPN)
- **MSt:** Nog steeds werksaam by KBH
- **HC:** Afgetree
- **MN:** I would like to be in a more ‘teaching or mentoring’ environment whether it be here or university level

**Wat doen jy om te ontspan? / What do you do to relax?**
- **MS:** Ek kyk TV om te ontspan
- **RS:** Ek lees graag en dan het ek ook my kerk verantwoordelijkhede
- **ZD:** Going to the gym
- **SM:** I love to read books
- **DP:** Watching rugby
- **MvD:** Gaan stap langs die see
- **NN:** I love to read
- **MSt:** Stap is my passie en dan geniet ek ook my alleentyd
- **HC:** Ek hou van fliek en om by die see te ontspan
- **MN:** I love to read (suspense and love stories) and I watch a lot of TV series (Grey’s Anatomy being one of my favourites)

**Wie/Wat inspireer jou? / Who/what inspire you?**
- **MS:** My onmiddelike toesighouer asook toesighouers in ander afdelings
- **RS:** My pastoor asook die person wat my genomineer het
- **ZD:** My Operational Manager, RPN Cloete
- **SM:** To gain knowledge
- **DP:** My kids inspires me
- **MvD:** My werk-ek geniet elke oomblik van dit wat ek doen
- **NN:** RPN B. Fourie
- **MSt:** My Operasionele Bestuurder, Mev. Philander
- **HC:** Mense wat swaarkry inspireer my om alles in my bes te probeer om hulle op te hef
- **MN:** I find inspiration in people rising above everyone’s expectations, against all odds

Look out for interviews with more category winners in the next issue.

Written by Felicia Lintnaar
The NHLS was established by an Act of National Government in 2000 (NHLS Act 37 of 2000), with the purpose of:

“Providing cost-effective and efficient health laboratory services to –
1. all public sector health-care providers;
2. any other government institution inside and outside the Republic that may require such services; and
3. any private health-care provider that requests such services, Support health research; and provide training for health science education.”

The mandate of the NHLS is to ensure that the purpose of the Act is structured as a national health laboratory State Owned Enterprise, tasked with responding to the individual requirements of each Provincial Department of Health, taking into account the geographic and technical requirements, health profile and treatment demands being raised in each province; and the legal and appropriate management of public health laboratory service for all South African citizens.

The NHLS is self-funding and regulated and managed on the Public Finance Management Act provisions (PFM Act, 29 of 1999).

NHLS performs services according to the ISO standard 15189 and 9001 and adheres to and maintains the Quality Management Systems (QMS) / SANAS Accreditation systems.

Financial management and administration relies on timeous payment of provincial accounts which is encouraged by discounts offered by the NHLS (payments within 21 days = 2%, payments within 31 days = 1%; this includes clinical services and conditional grants).

The NHLS is aligning with the National Ministry of Health and consequently, the Provincial Ministry of Health to regularly measure and further investigate service delivery models (or options of models) to interrogate wastage, productivity, application and relative proportioning of hospital and PHC’s pathology spend in relation to total budget, international and national price bench-marking to ensure value for money and best provision of pathology services.

**NHLS at KARL BREMER HOSPITAL:**

**KARL BREMER LABORATORY OPERATIONAL HOURS:**
Weekdays: 08:00 till 00:00
Weekends and public holidays: work referred to TBH via NHLS couriers

**COURIER PICK-UP TIMES:**
Weekdays: 00:45, 03:20, 05:30, 06:40 from EC
Weekends: 08:30, 10:30, 13:45, 15:30, 17:00, 20:00, 02:30, 05:30 from EC

**COMPLETION OF LABORATORY REQUEST FORMS:**
The laboratory request form is a legal document. All information provided on the laboratory request form is captured by a NHLS official on the Laboratory Information System (LIS).

All data provided on the laboratory request forms pulls through to downstream reporting e.g. financial reports, invoices, epidemiology reports, TAT reports, Top ten Reports, Alert organism reports, MDR TB reports etc. It is thus of utmost importance to complete all the required areas on the laboratory request form in a legible handwriting. Every single piece of information omitted from the request form, compromises the integrity of downstream reports.

There is a National drive to implement a Minimum Clinical Data Set (MCDS / Mandatory fields) for laboratory requesting. The table below illustrates the MCDS fields and its significance.
## MINIMUM REQUIREMENTS ON LABORATORY REQUEST FORM

<table>
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<tr>
<th><strong>LOCATION DETAILS</strong></th>
<th><strong>PATIENT DETAIL</strong></th>
<th><strong>HEALTHCARE WORKER DETAIL</strong></th>
<th><strong>SPECIMEN DETAIL</strong></th>
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<tr>
<td>Name of the facility / ward</td>
<td>Name &amp; Surname</td>
<td>Patient identification</td>
<td>Type of sample, anatomical site and Date and Time of collection.</td>
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<td>For registration, results sending, phone out of critical results, billing purposes.</td>
<td>Hospital number</td>
<td>Unique number to verify patient, matching of patient, sample and results.</td>
<td>To ensure integrity of result – correct test on the correct sample within set time limitations.</td>
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<td>Name &amp; Surname</td>
<td>Date of birth OR age</td>
<td>Define test reference ranges Additional patient identification</td>
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<tr>
<td>Patient identification</td>
<td>Gender</td>
<td>Define test reference ranges Additional patient identification</td>
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<td></td>
<td>Clinic/healthcare worker name</td>
<td>Authenticates request-audit requirement. Provides contact person to notify of abnormal/critical results.</td>
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<tr>
<td>HPCSA / SANCA number</td>
<td>HPCSA / SANCA number</td>
<td>Authenticates request-audit requirement.</td>
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<tr>
<td>Contact details of requester</td>
<td>Contact details of requester</td>
<td>For phoning out critical results</td>
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### LABORATORY RESULTS:
Printed copies of results are distributed to selective wards.

Laboratory results can be viewed electronically on wwdisa and in future (after the implementation of TrakCare) on the TrakCare web viewer.

- The PCs have to have access to Internet or Intranet; be connected to the domain and set up through the Array01 proxy.
  - URL for wwdisa: https://wwdisa.nhls.ac.za/
  - URL for TrakCare: https://labresults.nhls.ac.za/

### How to log a call if experiencing problems with wwdisa or TrackCare:
- During office hours: Contact your IO, Louisa du Toit at X1251 for assistance.
  - Log a call via email to the Provincial Helpdesk: Helpdesk@westerncape.gov.za or Cell.ServiceDesk@westerncape.gov.za or phone helpdesk at: Tel: 021 483 4800.

### How to apply for access to electronic laboratory results:
Obtain an application form from your Information Officer (IO), complete and submit to the IO. Your unique password will be communicated to you via the IO.

### Why are unique passwords issued and why should it be kept confidential?
In case of medico-legal action the NHLS can call up an audit trail on who viewed the result and when the result was viewed. The person who viewed the result can be held accountable. You put yourself at risk by sharing your password with colleagues! Thus if you do not have your own unique login, apply today!

Written by Louisa du Toit and input given by Nicoline Van der Westhuizen: Deputy Director Medical Technology Policy – PSS and Elzabe Olivier: ASD Medical Technology Policy – PSS
BREAD TAG APPEAL

As part of the C2Air2 challenge the Club Bremer team is getting involved in the BREAD TAG APPEAL INITIATIVE for 2015! We would like to appeal to all staff to please collect their bread tags at home and bring them to work. This is an exciting project where we as a facility can make a difference in someone’s life by collecting the tags, submitting it and receive a wheelchair that we can donate to those in need or even to our own facility, living out the core values of our department by displaying empathy and sincere concern about the well-being of employees and patients.

But where did it start and how does it work?

It all started with Mary Honeyburn from Noordhoek who founded Bread tags for wheelchairs in 2006. Today, almost 10 years later there are organisers countrywide collecting bread tags in exchange for wheelchairs. The project encourages people around the country to collect their bread tags which are then used to “purchase” wheelchairs for people who need them, but are unable to afford to pay R1 485.00 for a standard chair, due to financial difficulties.

How does it work?

Bread tags are collected, sold to be recycled and the money is then used to buy wheelchairs. The recycled bread tags are then pounded into granules by a hammer drill and then made into polystyrene articles such as seedling trays, frames etc.

How many bread tags = 1 wheel chair
1kg bread tags = R5
300kg = 1 wheelchair = cost R1485

So what do you have to do/how do we participate?
Quite simply, through your local community, school, church group, or yourself, start collecting your bread tags today and contact your champ who will take it to the collection point for KBH.

Not only do we make a positive impact on our environment by helping this highly common waste product avoid landfill, but for every 1kg you will receive R5.00 and then exchange your Rands for a wheelchair!

Come on CLUB BREMER!! Please show your support!!

Ready, Steady, Go
Club Bremer

Written by Denver Swanepoel
POTJJEKOS COMPETITION

The Karl Bremer Hospital annual Potjiekos Competition was a roaring success yet again and enjoyed by every member of staff that attended it. A variety of stalls were available expressing the theme of the competition “Recycle”. The decoration of the stalls and costumes worn by various competitors showcased the unique hidden talents of the KBH community. Various little competitions were held during the course of the morning showing another side of the KBH family. The wonderful array of music played by our resident DJ allowed the stall holders and visitors alike to “get their groove on”. After a very gruelling judging process the well-deserved winner was announced “THE FINANCE DEPARTMENT” They really put a tremendous amount of effort into decorating their stall and their costumes.

WORLD AIDS DAY 2014

1st December marks not just the start of another month but also International World Aids Day. Last year KBH encouraged all staff to join in a moment of silence in the foyer for those who have died of the disease. Staff also tried to create awareness, and therefore asked each department to make a poster that conveys a message about the disease. Three winners were chosen for best poster. The Outpatient Department arranged for Dr.Claasens (IDC Doctor) to speak to the patients in the waiting area about the correlation between HIV and TB. Victoria, the counsellor spoke about adherence of medication and the importance of parent adhering to children with HIV. The patients were treated with homemade muffins and juice at the end of the programme. HIV testing was done on request.

Written by Sr. Schilder
SPINACH CHICKEN SALAD WITH MANGO DRESSING

Nutrition Facts
• cal. (kcal) 234
• Start to Finish 20 mins

Ingredients
• 1 large ripe mango, halved, seeded, peeled, and cut into 3/4-inch pieces
• 4 tablespoons coarsely chopped cashews
• 1 tablespoon olive oil
• 1 tablespoon water
• 1/4 teaspoon salt
• 1/4 teaspoon black pepper
• 1 5 - ounce package fresh baby spinach
• 1 medium red sweet pepper, seeded and sliced
• 12 ounces cooked skinless, boneless chicken breast, sliced

Directions
• For dressing, in a food processor or blender combine one-fourth of the mango, 1 tablespoon of the cashews, the olive oil, the water, salt, and black pepper. Cover and process or blend until smooth.
• Arrange spinach leaves on four serving plates. Top with sweet pepper, chicken, and the remaining mango. Drizzle with the dressing. Sprinkle with the remaining 3 tablespoons cashews.

Ps: 1 ounce = 28.3495231 grams

Written by Rewena De Bruin
Balancing the work demands of a hospital with the Christmas spirit is no easy task. It can also be a difficult time for individuals in hospitals, but despite all these challenges, KBH staff made special effort for those unfortunate to be away from family and home over the festive period.

The wards were beautifully decorated in Christmas cheer and the standard meal of the hospital was replaced with a lovely Christmas lunch.

Staff tried their best to bring joy to these patients over Christmas. On the morning of the 24th of December, members of KBH staff brought the joy of Christmas carols to patients and staff in all departments. The joyous bunch visited each ward to sing their carols which is such an essential part of Christmas.

Each year nursing staff, doctors and support staff sacrifice their time with family over Christmas to care for their patients.

When we arrived at work on Christmas morning, everyone was quiet and the end of the shift seemed so far. I suppose no-one was really in a festive mood. So we put on our Santa hats and sung a few Christmas carols to get into the Christmas spirit. We put the presents in a red bag and I played Santa handing them out Ho Ho Ho! Seeing the smiles all round made every little thing worthwhile!

The innocence of a child is so beautiful, they still believe that Father Christmas exists, and why should we let them believe otherwise. Every child needs their own fantasy. Staff of ward 4C kept these kids fantasies alive by showering them with lots of love and gifts on Christmas day.

Written by Sr Arends and contributions received by Mr Manewil
YEAR END FUNCTIONS

It’s that time of the year that fatigue starts to kick in, when planning is done for that buzzing yet most enjoyable time. After a long hard working year, everyone is looking forward to relax and celebrate the festive season. Here’s how some of KBH staff spent theirs.

Ward 3C: Camping out on a lovely sunny day at the swimming pool. Lots of laughter, talking and eating. Some had bad sunburn, but says it was worth it.

Ward 5A: Had a lovely day and evening at the Palms

Medical Emergencies: Staff was looking forward to spend some time with their colleagues. They went directly after their shift to join in the fun, from in and out of the waters to competing in pool games against each other.

Ward Clerks: The ward clerks had a fantastic day at the Waterfront. Starting the day with breakfast at Spur and then going on a boat cruise with breath taking views of Cape Point and Robbyn Island. Thereafter, a nice lunch at one of the restaurants. Everybody enjoyed themselves.

Allied Health Professionals Christmas Lunch: The Christmas lunch was held on the 17th December 2014. Everyone was feeling merry with Christmas Carols setting the mood in the background. A lovely spread of festive food was laid out on a beautiful decorated Christmas table. Everyone tucked into scrumptious food from a beautifully prepared gammon to melt-in-the-mouth red velvet cupcakes. Secret Santa dropped in as well and everyone was in high spirits after the official kick off to the holiday season.

Finansies Department: Die foto sê alles behalwe dat die afdeling dit uiters baie geniet om te eet, is die afdeling se samesyn altyd vreugdevol. Op hierdie wyse vul ons mekaar aan en help die een hand die ander.
Guess who
Competition
Do you know who the person in the picture is?

The lady in our previous edition is ENA M Adams from ward 2B.
## OCTOBER 2014

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## DECEMBER 2014

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